

FORM B1 <b>United States Bankruptcy Court</b> <b>Northern District of Illinois, Western Division</b>		<b>Voluntary Petition</b>
Name of Debtor (if individual, enter Last, First, Middle): Gallagher, Patrick M.	Name of Joint Debtor (Spouse) (Last, First, Middle): Gallagher, Elaine M.	
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): None	All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names): None	
Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): 7195	Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): 1803	
Street Address of Debtor (No. & Street, City, State & Zip Code): 4518 E. Wonder Lake Drive Wonder Lake, IL 60097	Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 4518 E. Wonder Lake Drive Wonder Lake, IL 60097	
County of Residence or of the Principal Place of Business: Mchenry	County of Residence or of the Principal Place of Business: Mchenry	
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):	
Location of Principal Assets of Business Debtor (if different from street address above):		

**Information Regarding the Debtor (Check the Applicable Boxes)**

**Venue** (Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

**Type of Debtor** (Check all boxes that apply)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Individual(s) | <input type="checkbox"/> Railroad         |
| <input type="checkbox"/> Corporation              | <input type="checkbox"/> Stockbroker      |
| <input type="checkbox"/> Partnership              | <input type="checkbox"/> Commodity Broker |
| <input type="checkbox"/> Other _____              | <input type="checkbox"/> Clearing Bank    |

**Chapter or Section of Bankruptcy Code Under Which  
the Petition is Filed** (Check one box)

- |                                    |                                     |  |
|------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Chapter 7 | <input type="checkbox"/> Chapter 11 | <input checked="" type="checkbox"/> Chapter 13 |
| <input type="checkbox"/> Chapter 9 | <input type="checkbox"/> Chapter 12 |  |
| <input type="checkbox"/>           |                                     |  |

**Nature of Debts** (Check one box)

- ☒ Consumer/Non-Business ☐ Business

**Chapter 11 Small Business** (Check all boxes that apply)

- ☐ Debtor is a small business as defined in 11 U.S.C. § 101
- ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)

**Filing Fee** (Check one box)

- ☒ Full Filing Fee attached
- ☐ Filing Fee to be paid in installments (Applicable to individuals only)  
Must attach signed application for the court's consideration  
certifying that the debtor is unable to pay fee except in installments.  
Rule 1006(b). See Official Form No. 3.

**Statistical/Administrative Information** (Estimates only)

- ☒ Debtor estimates that funds will be available for distribution to unsecured creditors.
- ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

THIS SPACE IS FOR COURT USE ONLY

Estimated Number of Creditors	1-15	16-49	50-99	100-199	200-999	1000-over
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Assets	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Debts	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		<b>Document</b> Page 2 of 6 Name of Debtor(s): Patrick M Gallagher & Elaine M Gallagher	
<b>Prior Bankruptcy Case Filed Within Last 6 Years</b> (If more than one, attach additional sheet)			
Location Where Filed: Rockford, IL		Case Number: 03 B 74000	Date Filed: 07/29/2003
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: NONE		Case Number:	Date Filed:
District:		Relationship:	Judge:

  

<p style="text-align: center;"><b>Signatures</b></p> <p><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.                  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.                  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X /s/ Patrick M Gallagher                  _____                  Signature of Debtor</p> <p>X /s/ Elaine M Gallagher                  _____                  Signature of Joint Debtor</p> <p>_____                  Telephone Number (If not represented by attorney)</p> <p>_____                  Date</p>	<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p> <hr/> <p style="text-align: center;"><b>Exhibit B</b></p> <p>((To be completed if debtor is an individual whose debts are primarily consumer debts))</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.</p> <p>X /s/ Richard T. Jones                  _____                  Signature of Attorney for Debtor(s) <span style="float: right;">Date</span></p> <hr/> <p style="text-align: center;"><b>Exhibit C</b></p> <p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.  <input checked="" type="checkbox"/> No</p> <hr/> <p style="text-align: center;"><b>Signature of Non-Attorney Petition Preparer</b></p> <p>I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.</p> <p>_____                  Printed Name of Bankruptcy Petition Preparer</p> <p>_____                  Social Security Number (Required by 11 U.S.C. § 110(c).)</p> <p>_____                  Address</p> <p>_____                  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p>X _____                  Signature of Bankruptcy Petition Preparer</p> <p>_____                  Date</p> <p>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.</p>
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<p style="text-align: center;"><b>Signature of Attorney</b></p> <p>X /s/ Richard T. Jones                  _____                  Signature of Attorney for Debtor(s)</p> <p><b>RICHARD T. JONES 6184629</b>                  _____                  Printed Name of Attorney for Debtor(s)</p> <p>_____                  Firm Name</p> <p><b>138 Cass Street</b>                  _____                  Address</p> <p><b>Post Office Box 1693 Woodstock, Illinois 60098</b>                  _____</p> <p><b>(815) 334-8220</b>                  _____                  Telephone Number</p> <p>_____                  Date</p>	<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____                  Signature of Authorized Individual</p> <p>_____                  Printed Name of Authorized Individual</p> <p>_____                  Title of Authorized Individual</p> <p>_____                  Date</p>
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Chicago Tribune Post Office Box 6315 Chicago, Illinois 60680	Citifinancial 2038 N. Richmond Rd. McHenry, IL 60050	Citifinancial Mortgage Post Office Box 9023 Des Moines, Iowa 50368-9023
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ComCast 2508 West Route 120 McHenry, Illinois 60050	Daniel Sozinovich, MD 13707 N. Jackson Street Woodstock, IL 60098	Gentiva Carecentrix c/o OSI Collection Services Post Office Bxo 3900 Lakeland, FL 33802
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Gentiva Carecentrix, Inc. Post Office Box 538059 Atlanta, GA 30353-8059	Household Automotive Fin. c/o Sherman Acquisition 726 Exchange Street, #700 Buffalo, NY 14210	Household Automotive Finance Post Office Box 17904 San Diego, CA 92177
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Irfan Hafiz, MD 500 E. Ogden Ave., #V Hinsdale, IL 60521	James Skopec, MD 1110 N. Green Street McHenry, IL 60050	Lake/McHenry Pathology Assoc. 520 East 22nd Street Lombard, Illinois 60148
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Marengo Disposal 1050 Green Lee Street Marengo, Illinois 60152	Marengo Disposal c/o Frank M. Bonifacic, Attorney Box 673043 Milwaukee, WI 53267-3043	McHenry Radiologist Post Office Box 71073 Chicago, Illinois 60694
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McHenry Radiology & Imaging Post Office Box 220 McHenry, Illinois 60050	MCI Bankruptcy Department 3470 Rider Trails Earth City, MO 63045	MCI c/o NCO Financial Post Office Box 41417, Dept. 99 Philadelphia, PA 19101
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Merchants Credit Guide 223 W. Jackson Blvd. Chicago, IL 60606	Metor Infectious Dis. Consultants 600 E. Ogden, #C Hinsdale, IL 60521-2480	MKM Acquisitions 245 8th Ave., PMB 272 New York, NY 10011
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Moraine Emergency Physicians Post Office Box 8759 Philadelphia, PA 19101-8759	Northern IL Medical Center c/o OSI Collection Services, Inc 1375 E. Woodfied Rd., #110 Schaumburg, IL 60173-5447	Northern IL Medical Center Post Office Box 1447 Woodstock, Illinois 60098
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Northwest Physical Therapy 4680 Saganaw Street Lake in the Hills, IL 60156	Onyx Waste c/o D & B RMS 55 Shuman Rd., Box 482 Richfield, OH 44286	Orchard Bank Post Office Box 17051 Balitmore, MD 21297-1051
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Pellettieri & Assoc. 991 Oak Creek Drive Lombard, IL 60148	Relter Chiropractic 5415 W. Bull Valley Road McHenry, IL 60050	Sears National Bank Post Office Box 182149 Coloumbus, Ohio 43218-2149
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Tiger Financial Services  
309 W. Washington Street  
Chicago, IL 60606

Van Weelden Disposal, Inc.  
Post Office Box 1215  
Crystal Lake, IL 60039

Waste Management North  
22333 W. Highway 173  
Antioch, IL 60002

Waste Management North  
c/o D & B RMS  
4836 Brecksville Rd.  
Richfield, OH 44286

Wells Fargo Home Mortgage  
Bankruptcy Department  
3476 State View Blvd.  
Fort Mill, South Carolina 29715

Wilmot Medical Assoc.  
3920 Wilmot Rd.  
McHenry, IL 60050-2120

**UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois, Western Division**

In re Patrick M Gallagher & Elaine M Gallagher ,  
Debtor

Case No. \_\_\_\_\_

Chapter 13

**VERIFICATION OF LIST OF CREDITORS**

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 2 pages, is true, correct and complete to the best of my knowledge.

Date \_\_\_\_\_

Signature  
of Debtor

/s/ Patrick M Gallagher

PATRICK M GALLAGHER

Date \_\_\_\_\_

Signature  
of Joint Debtor

/s/ Elaine M Gallagher

ELAINE M GALLAGHER

B203  
12/94

United States Bankruptcy Court  
Northern District of Illinois, Western Division

In re Patrick M Gallagher & Elaine M Gallagher

Case No. \_\_\_\_\_

Chapter 13

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 2,700.00

Prior to the filing of this statement I have received ..... \$ 500.00

Balance Due ..... \$ 2,200.00

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

\_\_\_\_\_  
Date

/s/ Richard T. Jones

\_\_\_\_\_  
Signature of Attorney

\_\_\_\_\_  
Name of law firm